ing to the aggrandizement of commercial promoters. Can we not rid our profession of at least a part of this blight?

## THE NOSTRUM FROM THE VIEWPOINT OF THE PHARMACIST.\*

By W. A. PUCKNER, Professor of Chemistry, University of Illinois School of Pharmacy, Chicago.

While the responsibility of the medical teacher for existing conditions will be discussed by another speaker, I can not resist this opportunity offered me, a pharmacist permitted to address physicians, to say that without question the insufficient instruction in materia medica, pharmacology, pharmacy and chemistry offered by schools of medicine is the direct cause of present conditions.

I wish to point out to you how this lack of proper training along the lines indicated has made the physician dependent on ready-made remedies, proprietaries and nostrums, and how this, again, has been the making of "patent medicines," has led to self-medication and to counter prescribing, and has been the cause of making pharmacists forget their professional standing.

As a teacher, I would like to add that not only has the instruction in these subjects been inadequate because of the limited time allotted to them and because the student is led to attach too little importance to them, but often also because of the instructor's lack of familiarity with the subject which he is supposed to teach. This condition is but too frequently brought to my notice by former students who, having graduated in pharmacy, have taken up the study of medicine. As an illustration, I may refer to an article by Dr. Galloway 1 in which he protests against some haphazard, incorrect statements made by teachers in schools of medicine. Dr. Galloway reports statements made in favor of a certain brand of chloroform as opposed to another kind; statements so unfair and unwarranted that they can but be taken to show the lecturer's unfamiliarity with the subject he teaches. Other instances are cited which show that the lecturers, not being sufficiently familiar with the chemistry and pharmacy of medicines, are led to draw on the imagination and to offer to students statements which are entirely at variance with the facts.

Since the newly-graduated physician, therefore, has but a limited acquaintance with the remedies which he must employ, his prescriptions are liable to be unsightly, nauseating or, because of incompatabilities, perhaps inert. As a result of this two consequences are probable: First, if the patient discovers the physician's incompetency, when again in need of treatment he will go to his pharmacist for advice, since the pharmacist at least is familiar with the remedies which are used in the treatment of disease; second, when the physician comes to realize his lack of familiarity with medicines, then he most probably will fall back on the proprietary remedies, ready-made, with the dose on the label, of pleasant odor and taste and said to possess marvelous virtues.

The lack of familiarity with the common remedies often shown by physicians was strikingly

brought to my attention recently. I was suffering

from an attack of acute indigestion and called a

effect of the remedies which they administer the dependence on proprietaries would not be so bad, since most, or at least many, possess some merit. Unfortunately, however, the physician's training is likely to be such that he can not distinguish the rank fraud from the efficacious remedy, honestly made and sold. It is this inability to judge the effect of medicine which has brought about the custom, now almost universal, of outrageously exaggerating the values of these proprietaries. The following will illustrate how a physician often is led to use absolutely worthless remedies: Some years ago a preparation was placed on the market under the name of "Flora China," which was claimed to be "pure quinin sulphate," but to be tasteless and to do all that the bitter quinin would do. In appearance the substance resembled quinin sulphate and it certainly was tasteless, but on examination 2 I found it to be nothing but crystallized calcium sulphate. Yet some five years later a student told me that a certain physician prescribed it and had used no other kind of quinin for years.

In this way a large portion of the medical profession has become dependent on the advertising literature and the detail men of proprietary dealers for the treatment of their patients. They listen to tales of the wonderful virtues of "bracemup" or "stimuline," written probably by a person having no knowledge of medicine whatever, or perhaps compiled from obsolete medical works.

Recently a letter sent by a pharmaceutical house to its salesmen ("detail men") came to my notice. This letter, after stating that a successful salesman must be a student of human nature, etc., went on to say that the educated physician should be approached something like this: "Doctor, I have here a prep--; if you employ this drug in your practice you will find that this preparation of the drug, manufactured by reliable and skillful pharmacists, contains the very best quality of the drug and is combined in such a way as to obtain the greatest good from the remedy." Then it went on to say that, as pharmacists, it is the business of the manufacturing pharmacists to put into the hands of physicians drugs of the highest quality, knowing well that physicians will know what use to make of them. The letter continued that, unfortunately, however, there was a great many physicians of inferior education along lines of materia medica and therapeutics with whom such arguments would fail, and who must be told that a certain preparation is good

physician; in due time the attendant placed a powder on my tongue and requested me to swallow it. The powder, which I later learned contained magnesium carbonate, at once formed a compact mass, firmly adhering to the tongue, much as plaster-of-Paris would. I asked for a little water and was informed that the physician had prohibited all food and drink, but that I might have a teaspoonful of water on promise not to swallow it. Naturally I removed the concretion still adhering to my tongue and made no further attempt to take the medicine.

Were such physicians but competent to judge the effect of the remedies which they administer the

<sup>\*</sup> Reprinted from the Journal A. M. A.

for a certain kind of cough, that another remedy is a "winner" in the treatment of a certain brand of this or that disease and who like to read glowing testimonials of wonders accomplished. This letter in conclusion suggested that the salesman must judge which of these two methods to adopt in approaching the doctor. That in any case it would do no harm to flatter by assuming that the doctor knew his business, and later to change the mode of attack if they should find that he did not know his business.

Finally, let me illustrate how the use of proprietaries by the physician must cause a lack of confidence on the part of the patient, and induce selfmedication, or cause counter-prescribing by the druggist, and be the making of "patent medicines." While practicing pharmacy one day I was asked to prescribe for a man who said that he had contracted gonorrhea. Instead I advised him to consult a physician. Soon after I was summoned to the telephone and asked by a well known surgeon for the name of "those black capsules that come in a flat In due time I was requested to fill the prescription, and although the capsules were taken out of their container and placed in an ordinary pill box. yet the patient recognized the familiar remedy at a glance and in no complimentary manner commented on the time and money wasted in consulting the physician.

Imagine the frame of mind of the patient who, having consulted his physician and paid his fee, learns that his prescription calls for orangine or antikamnia, with which the daily press has made him familiar.

What do you suppose he will do when next he has neuralgic pain or any other pain; or if his sister or his brother or his aunt has any kind of pain?

But you say: "We do not prescribe remedies advertised in the lay papers. Yes, but how did Fellow's syrup, or worse still, McMunn's elixir, become a "patent medicine?" Because they were prescribed by physicians, who thus assumed the role of "advance agents." Rest assured that whenever a physician prescribes any of these remedies with nice, smooth, catchy names, no matter how illegible his writing, and even though he does not follow the advice of the promoters to direct that they be dispensed in the original containers, with the "name blown in the bottle," patients will, sooner or later, learn what they are taking. If the remedy has the desired effect and cures this or that trouble, the patient when next indisposed will purchase his medicine direct and dispense with the physician's services. Furthermore, he will recommend it to his friends, using the physician's name as a guarantee of its virtues. Next, its advertisements will be transferred from the medical journals to the daily press and the physician will have officiated at the birth of another so-called 'patent medicine.'

A practice still more reprehensible, it seems to me, is that of supplying patients with "physicians' samples." Seeing that his physician tries on him remedies about which he plainly knows nothing, it is small wonder if in the future the patient will prefer to consult the "patent-medicine" literature of the daily paper or will study the placards on fence posts

and in street cars to find some remedy fitted to cure him, since to him it must seem that his physicians did this when last consulted.

## **COUNTY SOCIETIES** SHASTA COUNTY.

At the last regular meeting of the Shasta County Medical Society, July 21, 1906, there being present Drs. C. E. Reed, S. T. White, O. J. Lawry, A. B. Gilliland, L. A. Banter, Robert L. Legge, Thomas J. Edgecomb and R. F. Wallace, members, and Drs. Jno. Sandhold or Kennett and A. M. Henderson of Sacramento, visitors, the following business was transacted.

Dr. W. E. Coppedge of Alturas was elected to

membership.

Resolution of Dr. C. E. Reed, offered at our January meeting regarding letter of resignation of Dr.

W. Bryant, viz.:

It was resolved that his resignation be not accepted on account of disrespectful language to our society, and that his name be dropped from the roll of membership of this society because of his continued violations of our laws in accepting contracts and performing contract work for lodges and organizaperforming contract work for lodges and organiza-tions, the proof of which is contained in his letter of resignation. This was referred to the executive committee for further action, and on the recom-mendation of said committee, the resolution was adopted and the name of Dr. C. W. Bryant ordered stricken from roll of members of Shasta County Medical Society. On motion, duly seconded, the secretary was instructed to notify the secretary of the Medical Society of the State of California and the secretary of the American Medical Association of the action of our society regarding Dr. Bryant.

In regard to fee for examinations for "old line"

life insurance companies, adopted at our meeting of October 21st, 1905, and which was fixed at \$5.00 minimum fee, the following resolution was offered

and unanimously adopted:

"Resolved, That any special arrangement for increase of fee to \$5.00 per examination made between medical examiner and local agent be not accepted by this society; the special arrangement must be made between the medical director of the company and the examiner" and the examiner.

Paper of the day was read by our visiting brother, Dr. A. M. Henderson of Sacramento, Cal., on the subject of "Cholelithiasis," and discussed by all the physicians present.

After refreshments, the society adjourned to meet in regular session in October, 1906.

R. F. WALLACE, Secretary.

## VENTURA COUNTY.

The Ventura County Medical Society held its regular meeting on Monday evening, August 6th, at the office of Dr. R. D. Potts, Oxnard. The subject for discussion had been prepared by Dr. Potts, and was entitled, "Diseases of a Non-Infectious Nature." Dr. Potts had evidently given his subject much study, and treated its many phases very exhaustively, relating some interesting cases which had occurred in his own practice.

President Cunnane opened the discussion, was followed by Vice-President Maulhardt, Stockwell, Dr. Bynum, Dr. Livingston and discussion, and Dr. Dr.

Teubner.

The absence of Dr. Love was noticed, and the opinion freely expressed that the society had lost a most valued member.

Mrs. Potts had prepared a generous and dainty repast for the entertainment of the members. dinner was greatly relished, and the society gave a vote of thanks to their genial host and hostess, Dr. and Mrs. Potts, for their cordial hospitality.
CHARLES TEUBNER, Secretary.